IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s):	Theodore A. Chapman; Richard E. Schumaker; Andrew W. Edwards; Stephen S. Morris; James P. Harkins; Bradley S. Jarvis
Assignee:	Printronix, Inc.
Title:	RFID Tag and Printer System

Serial No.:	10/660,856	Filing Date:	September 12, 2003
Examiner:	M. Chau	Group Art Unit:	2854
Docket No.:	M-15268 US	Confirmation No.	8641

Irvine, California
January 28, 2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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RESPONSE TO OFFICE ACTION

JAN 2 8 2005

Dear Sir:

In response to the Office Action dated November 16, 2004, Applicant respectfully

requests entry and consideration of the following amendments and remarks.

Fee
Only

MACPHERSON KWOK CHEN
& HEID LLP

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SAN JOSE, CA 95119
(408) 752-9040
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-1-   Serial No. 10/660,856

PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

Application or Docket Number

M—15268 US

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	34	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	34 minus 20 =	* 14
INDEPENDENT CLAIMS	4 minus 3 =	* 1
MULTIPLE DEPENDENT CLAIM PRESENT		☐

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐ OR OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	375.00	OR	BASIC FEE	750.00
X$ 9=		OR	X$18=	252
X42=		OR	X84=	84
+140=		OR	+280=	
TOTAL		OR	TOTAL	1086

CLAIMS AS AMENDED - PART II

1/28/05

OTHER THAN SMALL ENTITY OR SMALL ENTITY

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total	* 34	Minus	** 34	=	X$ 9=		OR	X$18=	
Independent	* 5	Minus	*** 4	= 1	X42=		OR	X84=	200
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐	+140=		OR	+280=	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	200

Paid

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total	*	Minus	**	=	X$ 9=		OR	X$18=	
Independent	*	Minus	***	=	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐	+140=		OR	+280=	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total	*	Minus	**	=	X$ 9=		OR	X$18=	
Independent	*	Minus	***	=	X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐	+140=		OR	+280=	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.